

CLAIMS ONLY

BEST AVAILABLE COPY

Application Number

10/648,605

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1		1		1	
2						
3						
4						
5						
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8						
9						
10	1		1		1	
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20	1		1		1	
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23	1		1		1	
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28	1		1		1	
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32						
33	1		1		1	
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36	1		1		1	
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48						
49						
50						
Total indep	7		7		7	
Total depend	33		33		29	
Total claims	40		40		36	

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total indep						
Total Depend						
Total Claims						